

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

OCT 9 11 38 AM '98

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) REFORM PARTY OF INDIANA	2. DATE 10-1-1998
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) 3144 N. NORFOLK STREET	3. FEC Identification Number C00338988
(c) City, State and ZIP Code INDIANAPOLIS IN 46224-2515	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

5. TYPE OF COMMITTEE (Check one)

- ☐ (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- ☐ (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
- | | | | |
|-------------------|-----------------------------|---------------|----------------|
| Name of Candidate | Candidate Party Affiliation | Office Sought | State/District |
| | | | |
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee. (name of candidate)
- ☒ (d) This committee is a State committee of the REFORM Party. (National, State or subordinate) (Democratic, Republican, etc.)
- ☐ (e) This committee is a separate segregated fund.
- ☐ (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
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8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee, and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
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I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER JO R. COLEMAN	SIGNATURE OF TREASURER 	DATE 10-3-1998
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 90 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-219-3420

FE6AN053

FEC FORM 1
(revised 4/87)

REFORM PARTY

of the United States of America
P.O. Box 9
Dallas, Texas 75221

Russell J. Verney, Chairman
Pat Benjamin, Vice Chair

TEL: (972) 450-8800
FAX: (972) 450-8821

Jim Mangia, Secretary
Mike Morris, Treasurer

October 1, 1998

Mr. Ulrich C. Harte
Chairman
Reform Party of Indiana
8513 Lamira Lane
Indianapolis, IN 46234

Re: The Reform Party of Indiana as the state committee of a political party


Dear Mr. Harte,

The Federal Election Commission in Advisory Opinion 1998-02 recognized as the state committee of a political party 29 state affiliates of the Reform Party of the United States of America ("Reform Party, USA") on the basis that these affiliates had submitted affiliation agreements under which the state affiliates agreed to accept the authority of the Reform Party, USA and abide by the terms of the Constitution of the Reform Party of the United States of America, and had obtained ballot access for a Reform Party Federal candidate. As to those state affiliates not specifically approved in Advisory Opinion 1998-02, the Federal Election Commission noted that where "a Reform State party affiliate had secured Federal candidate ballot access for at least one of its candidates, where that candidate also qualified as a candidate under the Act, and the State affiliate signs an agreement of affiliation with the National Reform Party similar to those reviewed in this opinion, then that State party need not reapply to the Commission for recognition of state committee status. It may rely on the conclusion reached in this opinion." See AO 1998-02, p. 6.

Whereas the Reform Party of Indiana obtained ballot access for Mr. Ross Perot for the office of President of the United States in the 1996 general election, whereas Mr. Ross Perot qualified as a candidate under the Federal Election Campaign Act, and whereas the Reform Party, USA has accepted from the Reform Party of Indiana a duly executed affiliate agreement identical to those reviewed in Advisory Opinion 1998-02, the Reform Party of Indiana need not apply to the Federal Election Commission for state committee status, but is the state committee of a political party by operation of law pursuant to the terms of Advisory Opinion 1998-02.

The Reform Party, USA is pleased to formally declare that it recognizes the Reform Party of Indiana as its affiliate in the State of Indiana, and congratulates the Reform Party of Indiana on qualifying as the state committee of a political party.

Sincerely,



Russell J. Verney
National Party Chairman

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10-6-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input checked="" type="checkbox"/> Electronic Filing	
<i>SW</i> PREPARER	10-9-98 DATE PREPARED